FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL
OMB Number: 3235-0076
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SEC USE ONLY					
Prefix	Serial				
DATE R	ECEIVED				
,	1				

Name of Offering (check if this is an amendment and name has changed, and indicate change.) \$75,000 Private Placement of 33,000 Units of LLC Interest	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE SECHER RECEIVED
A. BASIC IDENTIFICATION DATA	JUN 2 2 2004
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	10.
Tuckerbrook Alternative Investments, LLC	181 55
Address of Executive Offices (Number and Street, City, State, Zip Code) 30 Doaks Lane, Marblehead, MA 01945	Telephone Number (Including Area Code) (781) 639-0900
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	Received
To invest and reinvest in financial services.	Thomson Co
business trust limited partnership, to be formed limited	
GENERAL INSTRUCTIONS	2004
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. 6-440.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	49.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied to be filed with the SEC.	U, , ,
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Se trantable or have been made. If a state requires the payment of a few as a precondition to the claim for	ecurities Administrator in each state where sales

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

SEC 1972 (6-02)

this notice and must be completed.

filing of a federal notice.

1 of 9

		A. BASIC II	DENTIFICATION DATA		
2. Enter the information	n requested for the f	following:			
 Each promoter 	of the issuer, if the	ssuer has been organized	within the past five years;		
Each beneficial	lowner having the po	wer to vote or dispose, or d	firect the vote or dispositio	n of, 10% or more o	fa class of equity securities of the issuer
 Each executive 	officer and director	of corporate issuers and o	f corporate general and m	anaging partners of	partnership issuers; and
 Each general a 	nd managing partner	of partnership issuers.			
Check Box(cs) that Apply	v: Promoter	Beneficial Owner	Executive Officer	M Director	General and/or Managing Partner
Full Name (Last name fir Hassett, John			to design of the	**************************************	
Business or Residence Ad 30 Doaks Lane			Code)		
Check Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs	st, if individual)				
Groom, David					
Business or Residence Ad 30 Doaks Lane			Code)		
Check Box(es) that Apply	Promoter	X Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs Smith, Turner	•				
Business or Residence Ad	dress (Number and	Street, City, State, Zip C	ode)		
30 Doaks Lane	, Marblehea	d, MA 01945			
Check Box(es) that Apply	: Promoter	Beneficial Owner	Executive Officer	🕅 Director	General and/or Managing Partner
Full Name (Last name firs Grader, Moses		T			
Business or Residence Ad 30 Doaks Lane			ode)		
Check Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs	t, if individual)	- 			
Business or Residence Ad	dress (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs	t, if individual)		***************************************		
Business or Residence Add	dress (Number and	Street, City, State, Zip Co	ode)		**************************************
Check Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs	t, if individual)				
Business or Residence Add	dress (Number and	Street, City, State, Zip Co	ode)		
	(Use bla	ink sheet, or copy and use	additional copies of this s	sheet, as necessary)	

	: .				ъ.	INFORMAT	TION ABOU	JT OFFER	ING				
I. Ha	s the	issuer sol	d, or does t	he issuer	intend to s		accredited	investors i	n this offer	ring?		Yes	No X
2 Wh	nat is	the minin	num investr					_				\$no i	minimum
												Yes	No
3. Do	es the	offering	permit join	t ownersh	ip of a sing	gle unit?						¥	
con If a or s	nmiss perso states	ion orsin on to be lis list the n	ilar remune sted is an as	ration for sociated por proker or d	solicitation erson or ag ealer. If m	n of purchas ent of a bro ore than fiv	sers in conn ker or deal ve (5) perso	ection with or registere ns to be lis	n sales of se d with the ! ted are asso	curities in t SEC and/or ociated per	lirectly, any the offering. with a state sons of such		
Full Na	me (L	ast name	first, if ind	ividual)									
Busines	s or F	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Name o	ť Ass	ociated Bi	roker or De	aler					**************************************		***************************************	•	
States in	ı Whi	ch Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Ch	ieck "	All States	s" or check	individua	l States)	•••••				••••••		☐ Al	l States
IL MI RI		AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Nai	ne (L	ast name	first, if indi	vidual)		-							
Busines	s or l	Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)						
Name of	f Asso	ciated Br	oker or De	aler	······································								
<u> </u>	1371 :		Listed I-las	6 11 11 1		. 0.1:	<u> </u>						
			" or check									□ Ai	l States
(011	icck	All Didies	of cheek	uividuai	States)			****************				☐ A.	States
IL MI		AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ET ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV		MS OR WY	MO PA PR
Full Nar	ne (L	ast name	fīrst, if indi	vidual)									
Business	s or I	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Name of	Asso	ciated Br	oker or Dea	ıler						<u> </u>			
States in	Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Ch	eck "	All States	" or check	individual	States)	······						☐ All	States
IL MI		AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	ŌK	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	Aggregate Offering Pri		Aı	mount Sol	Already
		0	-		(
	Debt	· 		\$,
	Equity	S		\$_		
	Common Preferred					
	Convertible Securities (including warrants)			\$_		
	Partnership Interests			\$	(
	Other (Specify <u>limited liability company interests</u>			\$_	75,0	
	Total	75,00	0	s	75,0	000
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggr	egate
		Number Investors				mount
	Accredited Investors	3		S _	75,0	000
	Non-accredited Investors	0		s _)
	Total (for filings under Rule 504 only)	0		\$ _	()
	Answer also in Appendix, Column 4, if filing under ULOE.					
3 .	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.					
	Type of Offering	Type of Security		D	ollar A Solo	Amount I
	Rule 505	N/A		\$	N/A	Ā
	Regulation A	N/A	_	s	N/A	4
	Rule 504	N/A	_	\$	N/A	1
	Total	N/A		s	N/A	
•	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	5.7	_		, -	
	Transfer Agent's Fees			S	0	
	Printing and Engraving Costs			\$	0	
	Legal Fees			\$	1.00)O
	Accounting Fees			s_	0	
	Engineering Fees			\$	0	
	Sales Commissions (specify finders' fees separately)			\$	0	
	Other Expenses (identify) <u>filing fees</u>			<u>s</u>	n	•
	Total		₩	÷	1.00)()

b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	
	\$ 74.000
5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	
Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	
Purchase of real estate	s 0
Purchase, rental or leasing and installation of machinery and equipment	□\$0
Construction or leasing of plant buildings and facilities	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	
Repayment of indebtedness	
Repayment of indebtedness	74,000
Other (specify):	
s0	s0
Column Totals	≥ \$ 74,000
Total Payments Listed (column totals added)	,,000
D. FEDERAL SIGNATURE	
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	
Issuer (Print or Type) Signature Date	
Tuckerbrook Alternative Investments, LLC	04
Name of Signer (Print or Type) Title of Signer (Print or Type)	
John J. Hassett President	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)